

**LIMITED LIABILITY COMPANY
APPLICATION FOR CERTIFICATE OF REGISTRATION
AND ARTICLES OF CONTINUANCE**

Wyoming Secretary of State
The Capitol Building, Room 110
200 W. 24th Street
Cheyenne, WY 82002-0020

Phone (307) 777-7311/7312
Fax (307) 777-5339
E-mail: corporations@state.wy.us

Pursuant to W.S. 17-15-143 of the Wyoming Limited Liability Act, the undersigned hereby submits the following Articles of Continuance:

1. The name of the limited liability company is: _____

2. It is organized under the laws of: _____
3. (a) The date of its organization is: _____ (b) The period of its duration is: _____
4. The address of its principal office is: _____

5. The mailing address where correspondence and annual reports can be sent: _____

6. The physical address of its proposed registered office in Wyoming and the name of its registered agent at that address is: _____

(The agent must be an individual who resides in this state, a domestic corporation or a not-for-profit domestic corporation or a foreign corporation or not-for-profit foreign corporation authorized to transact business in this state.)

7. The purpose or purposes of the limited liability company which it proposes to pursue in the transaction of business in this state: _____

8. If the company is to be managed by a manager or managers, the names and addresses of such managers: _____

If the management of the company is to be reserved to the members, the names and addresses of its members: _____

9. The total amount of capital contributions: \$_____ .

10. The limited liability company will abide by the constitution and laws of this state.

Date: _____

By: _____

Title: _____

State of _____)
County of _____)

I, _____, Notary Public, do hereby certify that on this _____ day of _____, _____, personally appeared before me _____, who, being by me first duly sworn, declared that he/she signed the foregoing document as _____ of the limited liability company and that the statements therein are true.

In witness whereof, I have hereunto set my hand and seal this _____ day of _____, _____.

(Notarial Seal)

Notary

My commission expires: _____

INSTRUCTIONS:

1. *Filing Fee: \$100.00*
2. The application shall be executed by the manager or managers if any, or by any member who is authorized to execute the application on behalf of the limited liability company and shall be verified by the person signing the application on behalf of the limited liability company.
3. The application shall be accompanied by one exact or photo copy.
4. The following documents must accompany the application:
 - a. Written consent to appointment manually signed by the registered agent.
 - b. A document from an official of the foreign jurisdiction indicating that the company will be dissolved after it continues to Wyoming.
 - c. A copy of the company resolution authorizing continuance of the limited liability company into Wyoming.
 - d. A certified copy of its original articles of organization and all amendments currently certified within the last six (6) months by the proper officer of the state or nation of formation.

**CONSENT TO APPOINTMENT
BY REGISTERED AGENT**

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I, _____, voluntarily consent to serve as
the registered agent for _____
on the date shown below.

The registered agent certifies that he is: (check one)

- ☐ (a) *An individual who resides in this state and whose business of-
fice is identical with the registered office;*
- ☐ (b) *A domestic corporation or not-for-profit domestic corporation
whose business office is identical with the registered office; or*
- ☐ (c) *A foreign corporation or not-for-profit foreign corporation au-
thorized to transact business in this state whose business office
is identical with the registered office.*

Dated this _____ day of _____, _____.

Signature of Registered Agent